

Docket No. 1769/41426-FA-PCT-US/JPW/BJA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Ron S. Israeli et al.

Serial No. : 10/751,346 Examiner: Lei Yao

Filed : January 2, 2004 Group Art Unit: 1642

For : PROSTATE-SPECIFIC MEMBRANE ANTIGEN AND USES THEREOF

Mail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: October 31, 2007

Sir:

Transmitted herewith is an amendment to the above-identified application.

Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE		FEE	
				Small Entity	Other Entity	Small Entity	Other Entity
Total Claims	<b>8</b> -	* <b>20</b> =	*** <b>0</b> x	\$25	\$50	=	<b>0.00</b>
Independent Claims	<b>1</b> -	** <b>3</b> =	*** <b>0</b> x	\$105	\$210	=	<b>0.00</b>
Multiple Dependent Claim(s) Presented For First Time Yes <input checked="" type="checkbox"/> No				\$185	\$370	=	<b>0.00</b>
				TOTAL ADDITIONAL FEE \$ <b>0.00</b>			

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.  
 \* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.  
 \*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.  
 \*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Transmittal Letter

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The following are also enclosed:

One additional copy of this Amendment Transmittal Letter

Return Receipt Postcard

An Information Disclosure Statement, including Form PTO-1449  
(Copies of citations included: Yes        No         
and a fee of \$        included)

A Petition for an Extension of Time, including a fee of  
\$ 525.00 for a Petition for 3 Month(s) Extension of Time

Other (identify): \$405.00 fee for filing a Request  
for Continued Examination

THE TOTAL FEE DUE IS \$ 930.00.

A check in the amount of \$ 930.00 is enclosed.

Please charge Deposit Account No.        in the amount of  
\$       .

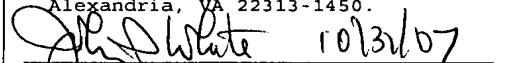
The Commissioner is hereby authorized to charge any additional fees  
required or credit any overpayment to Deposit Account No. 03-3125  
as follows:

Fees under 37 C.F.R. §1.16 for the presentation of extra claims  
 Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,



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I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:	
Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.	
 10/31/07	
John P. White Reg. No. 28,678	Date